# **City of Rome REAP - Revolving Loan Program**

## **2012 APPLICATION**

## I. General Information

Name of Applicant's Business	Tax ID #	E-mail Address
Business Address	Phone #	Fax Number
Project Address (if different)	Cell#	DUNS#

#### NAME OF BUSINESS OWNER/PRESIDENT AND KEY EMPLOYEES

Name:	Soc. Security #:
Title:	% Ownership of Company:
Home Address:	
Name:	Soc. Security #:
Title:	% Ownership of Company:
Home Address:	
Name:	Soc. Security #:
Title:	% Ownership of Company:
Home Address:	

Accountant NAME:	Phone Number:
Attorney NAME:	Phone Number:

Type of Business (Select One)		
Sole Proprietor Partnership	0	Corporation
Coods Duadwood on Comices Offered		Annual Cusas Calas
Goods Produced or Services Offered		Annual Gross Sales (if applicable)
# of Current Full-Time Employees	# of Current Part-	Time Employees
Date Opened	Minority or Fema	lle-Owned Business?
	If YES, % of Owne	ership:
Brief History of the Company (if business plan is pro	vided, ignore this c	question)

# **II. LOAN REQUEST**

Activity	Total Cost	Amount Requested	Purchase or Contract Date
Acquisition of Property or Lease Agreement			
Machinery/Equipment			
Working Capital			
Other (Specify)			
BANK INFORMATION			
Participating Financial Instit  Name of Loan Officer:	ution:		
Phone Number:			
Amount Financed:			
III. OWNER MAT  The City requires a 10-50% of total project. Indicate source	wner investment in th		ot exceed 50% of the

# (Attach resumes, if available) **EXPERIENCE SKILLS OF OWNER/S CREDIT EXPERIENCE - REFERENCES Financial Institutions** CONTACT/PHONE NO# NAME **LOAN BALANCE** Suppliers (if applicable) NAME **CONTACT PHONE #**

## **V. MARKET ANALYSIS**

List Existing Targeted Customers / Users			
Describe Competition			
Indications of Regional Need for Project Products or Services			

#### VI. COMMUNITY DEVELOPMENT BLOCK GRANT COMPLIANCE

#### **JOB CREATION or AREA BENEFIT?**

**JOB CREATION**: new hires within 6 months prior to application may be listed

Title of New Jobs Created	Number to be hired	Hours per week	Wage Rate	Employee Family Income

#### **AREA BENEFIT**

Will this project provide goods or services to a CDBG target neighborhood?	YES	NO

#### **PURCHASE OF PROPERTY**

H	f real	estate v	vill be	e purchased	, has an	environme	ntal stuc	ly been comp	leted?	YE	S	NO

#### VII. FINANCIAL AND CONSTRUCTION INFORMATION

The following must accompany this application (see samples/templates at websites):

- Balance Sheet (www.businesstown.com/accounting/basic-sheets.asp)\*
- Income Statement (www.businesstown.com/accounting/basic-statements.asp)\*
- Cash Flow Statement (current & projected www.businessplans.org/cashflow.html)
- Personal Financial Statement from Each Owner (<a href="http://office.microsoft.com/en-us/templates/TC010175221033.aspx?pid=CT101172761033">http://office.microsoft.com/en-us/templates/TC010175221033.aspx?pid=CT101172761033</a>)
- Credit Report
- Business Tax Returns (2 years)\*
- Copy of Specifications for Building Renovations, if applicable
- Business Plan (if project relates to a new business http://www.bplans.com/sample business plans.cfm)
- Sources & Uses (may be specified in business plan)
  - \* Not required from new businesses

#### SIGNATURE PAGE

I hereby certify that the information contained in this application is true and accurate. I understand that a knowingly-made false statement or misrepresentation in this application is cause for denial of a loan. I understand that my signature serves as my affidavit regarding job creation/retention, equity investment, and the postponement of purchases until conditional approval of the loan is received. I agree to allow the participating bank (if applicable) to release information necessary for the loan credit and compliance analysis. I also authorize the City of Rome to order and review a copy of my credit report as part of the process. This application shall remain the property of the City of Rome and I understand it is subject to review by the Department of Community and Economic Development Loan Committee.

Applicant:	DATE:
Applicant:	DATE: